



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2813 Name Albert James Green Corps

Questions to be put to the Recruit before Enlistment.

1. What is your name? I. Albert James Green
2. What is your full Address? } 2. St. Anthony
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 20 Years 5 Months
5. What is your Trade or Calling? 5. Farmer
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. No
8. Are you willing to be vaccinated or re-vaccinated? } 8. Yes
9. Are you willing to be enlisted for General Service? } 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... } 10. Yes
Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? } II. Yes

FOR THE DURATION OF THE WAR

I, Albert James Green do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

26 May 20th 1916 Albert James Green SIGNATURE OF RECRUIT.
Wm. H. Ayr Signature of Witness.

Albert James Green OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Albert James Green do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 20th day of May 1916.

Signature of Attesting Officer Wm. H. Ayr

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the.....

If enlisted by special authority, such will be attached to the original attestation.

Date.....191..... }
Place..... } Approving Officer.

* The signature of the Approving Officer is to be affixed in the presence of the Recruit.
† Here insert the "Corps" for which the Recruit has been enlisted.

* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name).....re-enlisted in the (Regiment).....on the (Date).....

DESCRIPTIVE REPORT ON ENLISTMENT

Applicable to all ranks. To correspond with entries on the Medical History Sheet.

Name Albert James Green

Apparent age 20 years 5 months. Height 5 feet 5 inches

Chest Measurement { Girth when fully expanded 37 1/2 inches
Range of expansion 4 inches

Distinctive marks.....

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs. Ambrose Green St. Leonards
Green Street | Relationship Mother

Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.
(c) Present address. (d) Initials of Officer verifying entry.

(a)	(b)	(c)	(d)

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									
Joined at _____ on _____									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
" " " Pension " " " [" "] " " "									

2813



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- 2. What is your full Address? 2. St. Anthony.
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- 4. What is your age? 4. 20 Years 5 Months
- 5. What is your Trade or Calling? 5. Farmer
- 6. Are you Married? 6. No.
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. No.
- 8. Are you willing to be vaccinated or re-vaccinated? } 8. Yes.
- 9. Are you willing to be enlisted for General Service? } 9. Yes.
- 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... } 10. { Name
Corps
- 11. Are you willing to serve upon the conditions as embodied in the roll of service } 11. Yes
to be signed by you if you are accepted?

I, Albert James Green do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

20. May 20th 16. Albert James Green SIGNATURE OF RECRUIT.
Chas. H. Ayré Signature of Witness.

Albert James Green OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Albert James Green do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

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I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 20th day of May 1916.

Signature of Attesting Officer Chas. H. Ayré Capt.

† CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been compiled with. I accordingly approve, and appoint him to the.....

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Date..... 191..... } Approving Officer.
Place..... }

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DESCRIPTIVE REPORT ON ENLISTMENT

Applicable to all ranks. To correspond with entries on the Medical History Sheet.

Name Albert James Green
 Apparent age 20 years 5 months. Height 5 feet 5 inches
 Chest Measurement { Girth when fully expanded 37 1/2 inches
 Range of expansion 4 inches
 Distinctive marks.....

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Ambrose Green St Leonards
French Shore | Relationship Mother

Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow.	(b) Place and date of marriage.	(c) Present address.	(d) Initials of Officer verifying entry.

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>30-5-16</u>									
Joined at <u>John's</u> on <u>May 30th 16</u>									
Embarked at John's S.S. Section in Oct 28 '16									
Disembarked France 1-12-16									
Discharged to duty 24-4-17									
With Bathn 5-5-17									
Admitted to 4000 16-8-17									
Died 4 S.W. Arms & High Street at 4000 17-8-17									
Buried at St George's Dept 557, 1782 Row 3, 19									
Total Service forfeited as above.....									

Total Service towards Engagement to 17-8-17 [date of discharge] 1 years 80 days
 Pension [" "] " " " "



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of *Albert Green*
aged *20* conducted at *CLB*
Date: *May 29/16* Recruiting Officer:

NO OF TEST FINDING

1 *no*
2 *no*
3 *no*
4 *no*
5 *no*
6 *no*
7 *yes*
8 *yes*
9 *no - no*

10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32

of 6 Both

28/3

33 *no*
34 *5-5*
35 *185 1/2 / 39 1/2*
36 *33 1/2 / 39 1/2*
37 *\$ 300.00 per year*
38 *Mrs. Ambros Green. St. Anthony. French Shore*
39 *none*

J. J.

Signature of Medical Examiner: *J. W. Burden*
Leu

C.R. 2813

Extract from Nominal Roll of Mfld. Regt. Draft No. 14
from 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked Southampton,
30-11-16.

2813 Pte. A.J. Green.

GRAVE SITE.

Extract of Casualties received from Pay & Record Office,
London, dated January 19, 1918.

Extract from report of Grave, found, marked and registered
by D.G.R.&E. List No. 32120.G. place of Grave. Dozinghem
British Cemetery $2\frac{1}{2}$ miles N. of Poperinghe. &&&

#2813 Pte. A.J.Green.

Report ~~d~~ SS.P.1782. Proven 5.29). date of Death 17/8/17.

Auth: List from War Office, Reported by Graves Registration
Units.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender _____ Address _____

Line Number	Rcd	By	Sent	by	Check

Dated August 25, 1917.

To Church of England Clergyman,
St. Anthony.

Regret to inform you Record Office, London, today reports No. 2813, Private Albert J. Green, son of Mrs. Ambrose Green, St. Leonards, St. Barbe, died at Fourth Casualty Clearing Station on August seventeenth as a result of gunshot wounds received in right arm right thigh and neck. Please inform relatives.

R.A. SQUIRES

Colonial Secretary

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(NOT TRANSMITTED)

Signature of Sender _____

Address _____

Line Number	Rcd	By	Sent	by	Check

Dated August 25, 1917.

To Mrs. Ambrose Green,

St. Leonard's,

St. Barbe.

Regret to inform you Record Office, London, today reports No. 2813, Private Albert J. Green, died at Fourth Casualty Clearing Station August seventeenth, as a result of gunshot wounds in right arm, right thigh and neck.

R.A. SQUIRES

Colonial Secretary.

FOR TYPEWRITER

C.R. 2813

Extract from Code Telegram from Major Timewell, to the Hon.
the Colonial Secretary, received August 25th., 1917.

DIED OF WOUNDS 4th CASUALTY CLEARING STATION.

GUNSHOT WOUND RIGHT ARM RIGHT THIGH

NECK

#2813 GREEN

2813. Private Albert Green.

Extract of telegram dated August 25th, 1917.

Gunshot wounds right arm right thigh, neck.

Admitted to 4th. General Casualty Clearing Station.

897

1471

C.R. 2813



NEWFOUNDLAND CONTINGENT

CASUALTIES.

Previously reported "Wounded", 20/4/17,
subsequently reported on Nominal Roll,
1st Battalion, (5/5/17),

2813, Green, Pte. A.J.

✓ _____

Record Office,
16/5/17.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Fred M. Ambrose

Signature of Sender _____

Address _____

Line Number	Rcd	By	Sent	by	Check

Dated May 3, 1917.

To Mrs. Ambrose Green,
St. Leonard's,
St. Barbe.

Regret to inform you that Record Office, London, officially reports No. 2813, Private Albert J. Green, suffering from shell shock.

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J. R. BENNETT,
Colonial Secretary.

FOR TYPEWRITER

2813

C.R.

Extract from Nominal Roll Draft (All Ranks) to 1st
Bn. B.E.F. Embarked Southampton.

2813 Pte. A.J. Green.

30-11-16

C.R. 2813

Extract from Nominal Roll embarked St. John's for Overseas
20/6/16.

2813 Pte. A.J. Green.

C.R. 7813

Albert J. Green was attested for General Service
with the NEWFOUNDLAND REGIMENT on May 30th 1916

Regimental No. 2813 was allotted to Pte A.J. GREEN.

AUTHORITY:

Record Officer

Dept. of Militia;

March 25th, 1919.

Albert J. Green was attested for General Service
with the NEWFOUNDLAND REGIMENT on May 30th 1916

Regimental No. 2813 was allotted to Pte

A Green

C.R.

2813.

~~11/10~~

To be used only for Special Reserve Recruits, and for Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY

Surname Green

Christian Name Albert

Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY	
	Right	Left	Right	Left
Examined	on <u>29th</u> day of <u>May</u> 19 <u>16</u>		on _____ day of _____ 19 <u>11</u>	
	at <u>St John's</u>		at _____	
Declared Age	<u>20</u> years <u>5</u> mo <u>5</u> days		years _____ days _____	
Trade or Occupation	<u>Same</u>		_____	
Height	<u>5</u> feet <u>5</u> inches		feet _____ inches _____	
Weight	<u>135</u> lbs.		lbs. _____	
Chest Measurement	Girth when fully expanded... <u>37 1/2</u> inches		_____ inches _____	
	Range of expansion... <u>4</u> inches		_____ inches _____	
Physical Development	_____		_____	
Vaccination Marks	Arm	_____	_____	_____
	Number	_____	_____	_____
When Vaccinated	_____		_____	
Vision	R.E.—V= <u>6/6</u>		R.E.—V=_____	
	L.E.—V=_____		L.E.—V=_____	
(a) Marks indicating congenital peculiarities or previous disease	(a) _____		(a) _____	
(b) Slight defects but not sufficient to Cause Rejection	(b) _____		(b) _____	
Approved by (Signature)	<u>L. M. Patterson</u>		_____	
(Rank)	_____		_____	
Enlisted	at <u>St John's</u>		at _____	
	on <u>29th</u> day of <u>May</u> 19 <u>16</u>		on _____ day of _____ 19 <u>11</u>	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>1st Newfld Regt</u>	<u>2813</u>	_____	_____
Transferred to	_____		_____	
Became non-effective by	_____		_____	
(Signature)	on _____ day of _____ 19 <u>11</u>		on _____ day of _____ 19 <u>11</u>	
(Rank)	_____		_____	

No. 2682



3 1ST. NEWFOUNDLAND REGIMENT 10

ALLOTMENTS

I, Albert J. Green, Regl. No. 2813

hereby agree, until further notification by me, and in similar official form to make an Allotment of Sixty Dollars and Sixty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons concerned, viz.:

Allotment begins Aug 1st /16

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>7695</u>	<u>Mother</u>	<u>Mrs Sarah Green</u>	<u>French point</u> <u>St Leonard</u>	<u>60</u>
		<u>Commencing</u> <u>1/9/16</u>		
Total Allotment, \$				

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

Sig. Chas. R. Aye Capt.
 Officer Commanding
 Company
July 24th
St John's 1916

(Sig.) Albert J. Green
 (Rank) Plt

PAY LIST.

to

191 **•** Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps *Newfoundland*
 No. *2813* Rank *Private* Name *Green A J.*
 Died (a) *Intestate* at *France* on the *17th* of *August* 191 *7.*
 Deserted at _____ on the _____ of _____ 191 *7.*

I Certify to the correctness of above in every particular.

 { Commanding Squadron, Troop,
 Battery or Company.

STATEMENT OF ACCOUNT.

[Form 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month <i>17/8/17</i>	15	5	5
	Cash issues (Date of each issue to be stated)				Pay days at _____ from _____ to _____	<i>14</i>	<i>9</i>	<i>11</i>
		£	s.	d.	Proficiency, Service or good conduct pay days at _____ from _____ to _____			
	191				Messing allowance _____ days at _____			
	"				from _____ to _____			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	Consolidated stoppage				Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity			
	Balance due by the Paymaster	15	5	5	Balance due to the Paymaster	<i>14</i>	<i>9</i>	<i>11</i>
		<i>14</i>	<i>9</i>	<i>11</i>		15	5	5
		£				£		
		15	5	5		<i>14</i>	<i>9</i>	<i>11</i>
		<i>14</i>	<i>9</i>	<i>11</i>				

CHECKED
[Signature]
8/17/17

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ _____ is correctly chargeable against the Public (b).

Dated at _____ this _____ day of _____ 191 _____ Paymaster.

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.
 (b) Words in Italics to be struck out when there is no debtor balance.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.
 Number of Sheet First.
 Signature of O. C. Company [Signature]

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 3. Forms B. 121. 29.
 (626) W:017/2124 1000m 6/15ss 83 56

Regiment of Newfoundland.

Serial Number and Name <u>2813 Green A.J.</u>	Enlistment Age on <u>20</u> years <u>5</u> months	Trade <u>Farmer</u>	Good Conduct Badges, Service Pay or Proficiency Pay
Joined <u>Depot</u> Date <u>5/9/16</u>	Place and Date of Enlistment <u>St John 30-5-16</u>	Religion <u>C of E.</u>	
Joined _____ Date _____	Period of { with Colours _____ years. with Reserve _____ years.	Place of Birth <u>St Anthony</u>	
Joined _____ Date _____			

Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order discharging with trial	By whom awarded	REMARKS

To be carried over

TRIPPLICATE

FIELD SERVICE

Army Form B. 2090A.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A: 36, or from other official documents or sources.

REGIMENT OR CORPS } NEWFOUNDLAND REGIMENT. Squadron, Troop, Battery or Company } 0 Company

Regimental No. 2813 Rank Private

Surname GREEN Christian Names A. J.

Died { Date Aug. 17th., 1917. Place 4th. Cas. Cl. Stat., Belgium or France.
Cause of Death* Died of Wounds received in Action.

Nature and Date of Report Messare, 18/8/17.

By whom made O.C., 4th. C.O.S.

* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

Burial { Place _____ Date _____
By whom reported _____

State whether he leaves a Will or not { (a) in Pay Book (Army Book 64) No. (b) in Small Book (if at Base) Not to hand.
(c) as a separate document Not known.

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the Deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

Station and Date } 27/8/17. Signature of Officer in charge of Section } [Signature]
Adjutant-General's Office at the Base }



MAJOR
O. i/c No. 1 Reg. Infantry Section
G.H.Q.. 3rd Echelon

FIELD SERVICE ORIGINAL



REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36, or from other official documents.

REGIMENT } NEWFOUNDLAND REGIMENT. Squadron, Troop, } C Company
 OR CORPS } 2813 Battery or Company } Private
 Regimental No. 2813 Rank Private

Surname GREEN Christian Names A. J.

Died { Date Aug. 17th., 1917. Place 4th. Cas. Cl. Stat., Belgium or France.
 Cause of Death* Died of Wounds received in Action.

Nature and Date of Report Message; 18/8/17.

By whom made O.C., 4th. C.C.S.

* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

Burial { Place _____ Date _____
 By whom reported _____

State whether he leaves { (a) in Pay Book (Army Book 64) No. (b) in Small Book (if at Base) Not to hand.
 a Will or not { (c) as a separate document Not known.

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the Deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

Station and Date | 27/8/17. | Signature of Officer in charge of Section | [Signature]
 Adjutant-General's Office at the Base

MAJOR
 C. i/c No. 1 Reg. Infantry Section
 G.H.Q.. 3rd Echelon

No. 2813 Name Green, Albert Sqn., Batty., or Company } E. Corps 21st Regt. Date of enlistment } 30/5/16 G.C. Badges } Service or Proficiency Pay }
 Date of last entry in Company Conduct Sheet } Clean No. and date of last drunk } Period not reckoning towards freedom from extra fine } Sheet No. 1 Signature O.C. Company, etc. } J. Cunningham Capt. Character } Good

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
In the field	7-3-17	Pte		Detachment of 2000 rations	W. Waterfield	Detained one day	10-3-17	W. Waterfield	
"	12/17			Losing 1000 rations	du	4 days pay	8/2/17	W. Waterfield	
				Died of Wounds 17.8.17.					



Army Form B. 199

Green, A. J.

2813

Receipt

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps **Newfoundland**

No. **2813**

Rank **Private**

Name **Greene, A. J.**

Died ~~(Intestate)~~

at **France**

on the **17** of **August**

191 7.

Deserted at

on the of

191 .

I Certify to the correctness of above in every particular.

*(Commanding Squadron, Troop,
Battery or Company.)*

STATEMENT OF ACCOUNT.

Form 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month 17/8/17	14	9	11
	<i>Cash issues</i> (Date of each issue to be stated)				Pay days at from to			
		£	s.	d.	Proficiency, Service or good conduct pay days at from to			
	191				Messing allowance days at from to			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	"							
	Consolidated stoppage							
	Balance due by the Paymaster	14	9	11	Balance due to the Paymaster			
		£ 14	9	11		£ 14	9	11

This amount is ^{checked} in accordance with information received at the Pay & Record Office to // 11/11/17 and is therefore subject to amendment if, and as may be found necessary.

CHECKED.
M. P. O.
11/11/17

I hereby Certify that the above account is correct in every particular, ~~and that the debtor balance of £~~ *is not chargeable against the Public.*

Dated at this day of 191



(Signature)
Paymaster

- (a) Here state whether the soldier died intestate, or whether he left a will. In the latter case the will should be annexed hereto, if not already sent to War Office with Army Form B. 2050 or Army Form O. 1815.
- (b) Words in italics to be struck out when there is no debtor balance.

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps **Newfoundland**

No. **2813**

Rank **Private**

Name **Greene, A. J.**

Died (a) **Intestate**

at **France**

on the **17** of **August**

191 7.

Deserted at

on the of

191 .

I Certify to the correctness of above in every particular.

*Commanding Squadron, Troop,
Battery or Company.*

STATEMENT OF ACCOUNT.

[Form 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month 17/8/17	14	9	11
	Cash issues (Date of each issue to be stated)				Pay days at from to			
	£ s. d.				Proficiency, Service or good conduct pay days at from to			
	101				Messing allowance days at from to			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	Consolidated stoppage							
	Balance due by the Paymaster	14	9	11	Balance due to the Paymaster			
		£ 14	9	11		£ 14	9	11

This account is *checked* in accordance with information received at the Pay & Record Office to *11/12/17* and is therefore subject to amendment if, and as may be found necessary.

CHECKED.
M. B. 10
11/12/17

I hereby Certify that the above account is correct in every particular, ~~and that the debtor balance of £~~ NEWFOUNDLAND CONTINGENT ~~is correctly chargeable against the Public (a).~~

Dated at

this

day of

191



(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.

(b) Words in Italics to be struck out when there is no debtor balance.

DUPLICATE
FIELD SERVICE Army Form B. 2090A.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36, or from other official documentary sources.

REGIMENT OR CORPS } **NEWFOUNDLAND REGIMENT.** Squadron, Troop, Battery or Company } **C Company**
 Regimental No. **2813** Rank **Private**
 Surname **GREEN** Christian Names **A. J.**
 Died { Date **Aug. 17th., 1917.** Place **4th. Can. Cl. Stat., Belgium**
 Cause of Death* **Died of Wounds received in Action.**
 Nature and Date of Report **Message, 18/8/17.**
 By whom made **O.C., 4th. C.C.S.**



* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

Burial { Place _____ Date _____
 By whom reported _____

State whether he leaves a Will or not { (a) in Pay Book (Army Book 64) No. (b) in Small Book (if at Base) Not to hand.
 (c) as a separate document Not known.

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the Deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

Station and Date } **27/8/17.** Signature of Officer in charge of Section } *Salamon*
 Adjutant-General's Office at the Base

Army Form B. 103.

Casualty Form—Active Service.

Regimental Number **C.R. 2813**

Regiment or Corps **2/1 Newfoundland Regt.**

Rank **Pte** Surname **Green** Christian Name **A. J. James** **2109**

Religion **(C of E)** Age on Enlistment **20** years **5** months.

Enlisted (a) **St. John's** Terms of Service (a) **Duration** Service reckons from (a) **28/5/16**

Date of promotion to present rank _____ Date of appointment to lance rank _____

Extended { _____ } Re-engaged { _____ } Qualification (b) _____
or Corps Trade and Rate _____

Signature of Officer i/c Records.

Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
			Embarked S'hampton	30 NOV 1916	
			Disembarked Ruen	1-DEC 1916	
	Unit	Joined Battalion	France	12/2/16	B 213
			With BATT. 26. I. 17		
21.4.17	O.C. Unit	Wounded in Action	France	20 APR 1917	B 213
5.6.17	do	Discharged to duty from b.l.s.		24.4.17	Memo.
18.8.17	do	Wounded in Action		16 AUG 1917	B 213
18.8.17	4 b.l.s.	Died of Wounds (Arm & R. thigh & Neck)		17.8.17	Message

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoeing-Smith, &c.

Casualty Form—Active Service.

Regiment or Corps 2/1st Newfoundland Regt.Regimental No. 2813. Rank Pte. Name Green. N. James.Enlisted (a) St Johns. Terms of Service (a) Duration Service reckons from (a) 25/5/16.

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N.C.Os. }

Extended _____ Re-engaged _____ Qualification (b) _____



Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
	Unit.	Embarked.	Southampton	30. 11. 16.	
		Dis	Rouen	1. 12. 16.	
		Joined "Batta.	France.	12. 12. 16.	213.
			With Batta.	25. 1. 17.	
21. 4. 17.	O.C. Unit.	Wounded in Action.	France.	20. 4. 17.	213.
5. 6. 17.	Do.	Discharged. to duty from	C.C.P.	24. 4. 17.	Memo.
18. 8. 17.	Do	Wounded in Action.		16. 8. 17.	213.
18. 8. 17.	C.C.P.	Died of Wounds. (Arm. of Thigh struck).		17. 8. 17.	Message.

J. Aldridge
Major
Adj. No 1 Reg. Inf Section.
G.H.B. 3rd F. Balacon.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g., Signaller, Shoemaking Smith, etc., etc., also special qualifications in technical Corps duties.

December 18th. 1919

Mrs. Sarah Colbourne,
St. Leonard's
St. Barbe.

Dear Madam:

I enclose herewith
cheque for \$77.54, balance of estate of late
Pte. A. J. Green, due you as Administratrix of his
estate.

I also enclose
Letters of Administration.

Yours truly,

Major
Paymaster.

LM-
Enc. 2

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 77⁵⁴

Dec 6 19 19

Received from the First Newfoundland Regiment
the sum of Seventy Seven ⁵⁴ Dollars.
on account of Pay. Estab.
balance

Ch. No. 21594	Initials. <i>EW</i>
Pay Ledger 271	Initials. <i>WR</i>
Gen. Ledger.....	Initials.....

Regtl. No.....

Rank.....

T. C. B.

No. 2813

Rank

St

Name

A. J. Greene